

Waterway Analysis & Management System Questionnaire for Lake Fort Peak

Name/0	Company:					
Phone:						
Contac	t Person:					
Name o	of Vessel(s):					
Please us	se back of page if ad	ditional space is ne	eeded			
1. Useı	r Type: Pleasure	Commercial	Pilot	Licensed	Unlicensed	
2. Vess	el Type: Motor	Sail Ferry	Fishing	Tug/Barg	ge Deep Dra	aft
3. Ves	sel Specification	s: Length:	Be	am:	Draft:	
Tonnag	ge:H	leight of Eye:		# of Crew/P	Passengers:	
4. Wha	nt is your princip	ple cargo? (i.e.	petroleum,	dry goods,	personnel)	
5. Wha	nt principle bert	hs do you use?				
	al years of marit of maritime exp					
7. Wh	en do you transi	t this waterway	y? Day	Night	Restricted	d Visibility
			Yea	r Round	Seasonally	(to)
Radar	nt are your princ Magnetic Com	pass Radio B	_		• •	
9. Do y	ou utilize Pilot s	services?				
10. Do	es weather ever	cause a problei	m to navig	ation, if so	where and ex	xplain?
10. Ar	e tides or curre	ıts ever a prob	lem, if so	where and	explain?	

11. When transiting, how much vessel traffic do you normally encounter?
12. What Aids to Navigations do you feel are the most useful? (Buoys, Lights, Daybeacons)
13. What Aids to Navigations do you feel are the least useful?
14. What do you feel is the most difficult or dangerous part of the waterway and why?
15. Have you experienced communication problems, if so where and explain?
16. Have you had problems with charts and pubs?
17. Do you know of any specific danger/safety problems/issues? (shoals, hazards to navigation, collisions)
18. Do you anchor or moor within any of the area of this questionnaire? If yes which ones?

19. What are your recommendations for improvements, adjustments or changes?						

Your assistance in this matter is greatly appreciated!
Please e-mail, mail or fax your responses to, or contact:
Commanding Officer (dpw)
13th Coast Guard District 915 Second Ave, Room 3510 Seattle, WA 98174-1067 Attn: WAMS Manager e-mail: d13-pf-d13dpw@uscg.mil 206-220-7270

206-220-7265 (fax)